

**PART B - FEE(S) TRANSMITTAL**

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**JUN 04 2004**

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26646 7590 03/05/2004

**KENYON & KENYON**  
**ONE BROADWAY**  
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*Catherine E. Tamm*

(Depositor's name)

*Catherine E. Tamm*

(Signature)

*6/1/04*

(Date)

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|----------------------|---------------------|------------------|
| 10/018,726      | 04/05/2002  | Manfred Hellmann     | 10191/2085          | 5014             |

TITLE OF INVENTION: METHOD FOR ADAPTIVE DISTANCE AND OR DRIVING SPEED ADJUSTMENT IN A MOTOR VEHICLE

| APPLN. TYPE    | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE   |
|----------------|--------------|-----------|-----------------|------------------|------------|
| nonprovisional | NO           | \$1330    | \$300           | \$1630           | 06/07/2004 |

| EXAMINER         | ART UNIT | CLASS-SUBCLASS |
|------------------|----------|----------------|
| CAMBY, RICHARD M | 3661     | 701-096000     |

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Kenyon & Kenyon

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3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Robert Bosch GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Stuttgart, Federal Rep. of Germany

Please check the appropriate assignee category or categories (will not be printed on the patent);  individual  corporation or other private group entity  government

4a. The following fee(s) are enclosed:

Issue Fee

4b. Payment of Fee(s):

A check in the amount of the fee(s) is enclosed.

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(Authorized Signature)

*Richard L. Mayer, Reg. No. 22,490*

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(Date)

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